



Brentwood Recreation Department

1Dalton Rd. Brentwood,, NH 642-6400 ext. 20

For Office Use Only

Paid _____

Cash __ Check _____

Date _____

Registration Form

2010-2011 Men's 30+ Basketball

Name (Print) _____

Address _____ **Phone** _____

Email Address (please print clearly) _____

Emergency Contact _____ **Relationship** _____

Emergency Phone Number(s) _____

I, _____, understand that participation in the active, physical sport of basketball can result in injuries and do hereby release the Brentwood Recreation Dept., The Brentwood Recreation Commission, the Town of Brentwood and their agents from all claims, demands of chance on account of any and all injuries to persons or property that may result by virtue of my participation in said activity.

I agree that in case of accident, emergency medical care may be given to me by ambulance rescue squad, or other trained personnel. Whoever is transporting me from games will not be held responsible for any injury sustained while in transit.

Signature _____ **Date** _____

Cost: \$85. Deadline for registration is Dec. 6th.

Please make checks payable to the BRC.